

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000001722

FILED
Apr 17, 2007
Secretary of State

Entity Name: REALTY OPTIONS UNLIMITED, LLC

Current Principal Place of Business:

1909 3RD STREET NORTH
JACKSONVILLE BEACH, FL 32250

New Principal Place of Business:

14603 BEACH BOULEVARD
SUITE 2000
JACKSONVILLE, FL 32250

Current Mailing Address:

1909 3RD STREET NORTH
JACKSONVILLE BEACH, FL 32250

New Mailing Address:

14603 BEACH BOULEVARD
SUITE 2000
JACKSONVILLE, FL 32250

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

FASANELLI, FABIO M
1909 3RD STREET NORTH
JACKSONVILLE BEACH, FL 32250 US

Name and Address of New Registered Agent:

FASANELLI, FABIO M
14603 BEACH BOULEVARD
SUITE 2000
JACKSONVILLE, FL 32250 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: FABIO M. FASANELLI

04/17/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MM () Change (X) Addition
Name: FASANELLI, FABIO M
Address: 14603 BEACH BOULEVARD SUITE 2000
City-St-Zip: JACKSONVILLE, FL 32250

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: FABIO M. FASANELLI

MM

04/17/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date